

BEFORE THE DEPARTMENT OF PUBLIC
HEALTH AND HUMAN SERVICES OF THE
STATE OF MONTANA

In the matter of the amendment of ARM)	NOTICE OF PROPOSED
37.108.507 pertaining to Components of)	AMENDMENT
Quality Assessment Activities)	
)	NO PUBLIC HEARING
)	CONTEMPLATED

TO: All Interested Persons

1. On February 10, 2007, the Department of Public Health and Human Services proposes to amend the above-stated rule.

The Department of Public Health and Human Services will make reasonable accommodations for persons with disabilities who need an alternative accessible format of this notice. If you need to request an accommodation, contact the department no later than 5:00 p.m. on January 29, 2007, to advise us of the nature of the accommodation that you need. Please contact Dawn Sliva, Office of Legal Affairs, Department of Public Health and Human Services, P.O. Box 4210, Helena, MT 59604-4210; telephone (406)444-5622; FAX (406)444-1970; e-mail dphhslegal@mt.gov.

2. The rule as proposed to be amended provides as follows. Matter to be added is underlined. Matter to be deleted is interlined.

37.108.507 COMPONENTS OF QUALITY ASSESSMENT ACTIVITIES

(1) Annually, the health carrier shall evaluate its quality assessment activities by using the following HEDIS year ~~2006~~ 2007 measures:

(a) through (3) remain the same.

(4) The department adopts and incorporates by reference the HEDIS year ~~2006~~ 2007 measures for the categories listed in (1)(a) through (e). The HEDIS year ~~2006~~ 2007 measures are developed by the National Committee for Quality Assurance and provide a standardized mechanism for measuring and comparing the quality of services offered by managed care health plans. Copies of HEDIS ~~2006~~ 2007 measures are available from the National Committee for Quality Assurance, 2000 L Street NW, Suite 500, Washington, DC 20036 or on the internet at www.ncqa.org.

AUTH: 33-36-105, MCA

IMP: 33-36-105, 33-36-302, MCA

3. The Managed Care Plan Network Adequacy and Quality Assurance Act (Title 33, chapter 36, MCA) established standards for health carriers offering managed care plans and for the implementation of quality assurance standards in administrative rules. ARM 37.108.501 et seq. were adopted in 2001 to establish

mechanisms for the department to evaluate quality assurance activities of health carriers providing managed care plans in Montana.

ARM 37.108.507 requires health carriers to report their quality assessment activities to the department using Health Plan Employer Data and Information Set (HEDIS) measures, nationally-utilized measures that are updated annually. Since the HEDIS standards change somewhat every year, the rule must also be updated annually to reflect the current year's measures and ensure that national comparisons are possible, since the other states will also be using the same updated measures. The changes from adopted 2006 measures to the proposed 2007 measures are quoted below:

"Updated Random Number Table for Measures Using the Hybrid Method

Childhood Immunization Status

- Table CIS-A

In the Hepatitis B row, insert a comma between HCPCS Q3021 and Q3023.

Comprehensive Diabetes Care

- Table CDC-C

In the Outpatient row replace UB-92 Revenue code 052x with 0520-0523, 0526-0529.

In the Nonacute inpatient row add UB-92 Revenue codes 0524, 0525.

- Table CDC-F

Add:

°HCPCS S0620, S0621

°ICD-9-CM Diagnosis code V72.0

- Blood pressure level <130/80 mm Hg

Replace the existing paragraph with:

Using automated data, identify the most recent BP reading during the measurement year from an internal administrative database. If the most recent result is <130/80 mm Hg the member is numerator compliant. If the BP is ≥130/80 mm Hg or if there is no automated BP

reading during the measurement year, the member is not compliant. If there are multiple BPs on the same date of service, use the lowest systolic and lowest diastolic BP on that date as the representative BP.

- Blood pressure level <140/90 mm Hg

Replace the existing paragraph with:

Using automated data, identify the most recent BP reading during the measurement year.

If the MCO is using a combination of data from internal administrative databases and CPT Category II codes, it must search all sources and use the most recent result. An MCO that uses CPT Category II codes to identify numerator compliance for this indicator must search for all codes in Table CDC-L and use the most recent code to evaluate whether the member is numerator compliant.

If the most recent result is from an administrative database, the member is numerator compliant if the BP is <140/90 mm Hg. The member is not compliant if the BP is ≥140/90 mm Hg or if there is no automated BP reading during the measurement year. If there are multiple BPs on the same date of service, use the lowest systolic and lowest diastolic BP on that date as the representative BP.

If the most recent result is from a CPT Category II code, use Table CDC-L to evaluate whether the member is numerator compliant.

- Numerator: *Medical Record*

Add a sentence to Step 2 that reads:

The systolic and diastolic results do not need to be from the same reading.

- Note

To the first bulleted note, add a sentence that reads:

The methodology for the blood pressure control indicators must be consistent as well.

- Note

Add the following bullet:

°Do not include home blood pressure monitoring results or blood pressure readings that are self-reported by the member (e.g., home and health-fair BPs)."

The option of not updating the HEDIS measure was considered and rejected because these are national quality measures which allow comparison among health plans. If the measures are not kept current, this function is lost.

4. These rule changes will be applied retroactively to January 1, 2007. The rule changes are being applied retroactively because the HEDIS measures and the health carriers measure on a January through December calendar year. In addition, the 2007 HEDIS measures are already being used by the health carriers impacted by these amendments. As a result, there is no negative impact by these changes being applied retroactively to this date.

5. Interested persons may submit their data, views, or arguments concerning the proposed action in writing to Gwen Knight, Office of Legal Affairs, Department of Public Health and Human Services, P.O. Box 202951, Helena, MT 59620-2951, no later than 5:00 p.m. on February 8, 2007. Data, views, or arguments may also be submitted by facsimile (406)444-1970 or by electronic mail via the Internet to dphhslegal@mt.gov. The department also maintains lists of persons interested in receiving notice of administrative rule changes. These lists are compiled according to subjects or programs of interest. For placement on the mailing list, please write the person at the address above.

6. If a person who is directly affected by the proposed action wishes to express data, views, and arguments orally or in writing at a public hearing, that person must make a written request for a public hearing and submit such request, along with any written comments to Dawn Sliva, Office of Legal Affairs, Department of Public Health and Human Services, P.O. Box 4210, Helena, MT 59604-4210, by facsimile (406)444-1970 or by electronic mail via the Internet to dphhslegal@mt.gov no later than 5:00 p.m. on February 8, 2007.

7. If the Department of Public Health and Human Services receives requests for a public hearing on the proposed action from either 10% or 25, whichever is less, of those who are directly affected by the proposed action, from the Administrative Rule Review Committee of the legislature, from a governmental agency or subdivision, or from an association having no less than 25 members who are directly affected, a hearing will be held at a later date and a notice of the hearing will be published in the Montana Administrative Register. Ten percent of those directly affected has been determined to be one based on the two health carriers affected by rules covering components of quality assessment activities.

/s/ Bernard Jacobs for
Rule Reviewer

/s/ Joan Miles
Director, Public Health and
Human Services

Certified to the Secretary of State January 2, 2007.